

Application Data Sheet

Application Information

Application number::
Filing Date:: 12/03/01
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks:: 0
Number of copies of CDs:: 0
Sequence submission?::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: Microfluidic Devic with Multiple Microcoil NMR
Detectors
Attorney Docket Number:: 005092.00028
Request for Early Publication?:: NO
Request for Non-Publication?:: NO
Suggested Drawing Figure::
Total Drawing Sheets::
Small Entity?:: YES
Latin name::
Variety denomination name::
Petition included?:: NO
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: NO

Variable	Mean	SD	Min	Max
Age	38.5	10.5	25	55
Gender	0.5	0.5	0	1
Marital status	0.5	0.5	0	1
Education	12.5	1.5	10	15
Income	3500	1500	1000	6000
Health status	0.5	0.5	0	1
Exercise frequency	2.5	1.5	0	5
Stress level	4.5	1.5	1	7
Sleep quality	3.5	1.5	1	6
Diet quality	4.0	1.5	1	6
Work-life balance	3.0	1.5	1	5
Family support	4.5	1.5	1	6
Community involvement	2.0	1.5	0	4
Life satisfaction	5.5	1.5	3	7
Overall well-being	4.0	1.5	1	6

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Dean
Middle Name::	
Family Name::	Olson
Name Suffix::	
City of Residence::	Champaign
State or Province of Residence::	IL
Country of Residence::	US
Street of mailing address::	1804 Augusta Drive
City of mailing address::	Champaign
State or Province of mailing address::	IL

Country of mailing address:: US
 Postal or Zip Code of mailing address:: 61821

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: US
 Status:: Full Capacity
 Given Name:: Jim
 Middle Name::
 Family Name:: Norcross
 Name Suffix::
 City of Residence:: Champaign
 State or Province of Residence:: IL
 Country of Residence:: US
 Street of mailing address:: 1813 Winchester Drive
 City of mailing address:: Champaign
 State or Province of mailing address:: IL
 Country of mailing address:: US
 Postal or Zip Code of mailing address:: 61821

Correspondence Information

Correspondence Customer Number:: 22910

Representative Information

Representative Customer Number:: 22910

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/250,874	12/01/00

[illegible]

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FOUO: "SECRET"

Country of mailing address:: US
Postal or Zip Code of mailing address:: 61801

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name::
Middle Name::
Family Name::
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address::

City of mailing address::
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::

Correspondence Information

Correspondence Customer Number:: 22910

Representative Information

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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

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Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Protasis Corporation
 Street of mailing address:: 734 Forest Street
 City of mailing address:: Marlborough
 State or Province of mailing address:: MA
 Country of mailing address:: US
 Postal or Zip Code of mailing address:: 01752